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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/816,906
	Filing Date	March 23, 2001
	First Named Inventor	Joel G. HASSELL
	Art Unit	2623
	Examiner Name	Ngoc K. VU
	Attorney Docket Number	577172000900

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:  
Application is being transferred to another attorney.

### CORRESPONDENCE ADDRESS

1.	<input type="checkbox"/> The correspondence address is NOT affected by this withdrawal.				
2.	<input checked="" type="checkbox"/> Change the correspondence address and direct all future correspondence to:				
<input type="checkbox"/>	The address associated with Customer Number: <input type="text"/>				
<b>OR</b>					
<input checked="" type="checkbox"/> Firm or Individual Name	Marc Kaufman, Esq.				
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<small>NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.</small>					